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21839 7590 02/08/2010 BUCHANAN, INGERSOLL & ROONEY PC POST OFFICE BOX 1404 ALEXANDRIA, VA 22313-1404				Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
						(Signature)
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APPLICATION NO.	FILING DATE		FIRST NAMED INVENT	OR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/529,597	12/29/2005		Jyrki Kauppinen		028443-071	1736
TITLE OF INVENTION	: PHOTOACOUSTIC D	ETECTOR				
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	E PREV. PAID ISSU	E FEE TOTAL FEE(S) DU	E DATE DUE
nonprovisional	YES	\$755	\$300	\$0	\$1055	05/10/2010
EXAMINER		ART UNIT	CLASS-SUBCLASS]		
COOK, JONATHON		2886	356-502000			
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed frecordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) GASERA LTD. TURKU, FINLAND						
Please check the appropriate assignee category or categories (will not be printed on the patent):						
			b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. FEEL EXCENSES AND EXCEPT. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 024800 (enclose an extra copy of this form).			
5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).						
NOTE: The Issue Fee ar interest as shown by the	nd Publication Fee (if req records of the United Sta	uired) will not be accepte ites Patent and Trademark	d from anyone other that Office.	in the applicant; a reg	istered attorney or agent; or	the assignee or other party in
Authorized Signature	Peta I cala Pa	ta T. JeVale Ne	. Na. 60361	Date <u>Ma</u>	y 5, 2010	
Typed or printed name Matthew L. Schneider Registration No. 32814						
an application. Confider submitting the complete	itiality is governed by 35 application form to the ions for reducing this but irginia 22313-1450. DO	U.S.C. 122 and 37 CFR USPTO. Time will vary	1.14. This collection is depending upon the in a Chief Information Of	dividual case. Any c	omments on the amount of Trademark Office, U.S. De	and by the USPTO to process) ling gathering, preparing, and time you require to complete epartment of Commerce, P.O. er for Patents, P.O. Box 1450,

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